

## Abstract 288

**TITLE:** Young MSM's knowledge, attitudes and beliefs about the new HIV treatments

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**OBJECTIVES:** The marked decline in progression to AIDS and reduction in HIV-related mortality associated with the introduction of new combination therapies have raised concern that individuals might abandon safe sex practices because they believe that the new treatments reduce the risk of HIV transmission or that HIV infection is a less serious condition. This study examined knowledge, attitudes and beliefs of young men who have sex with men (MSM) about the new treatments.

**METHODS:** The Young Men's Survey (YMS) is a multisite cross-sectional HIV seroprevalence and behavioral risk survey of 1522 year-old MSM who attend public venues. Seattle and New York City (NYC) conducted YMS from 10/97 to 10/98. Questions about knowledge, attitudes and behaviors related to the new antiretroviral combination therapies were included in the structured personal interview.

**RESULTS:** A total of 313 MSM in Seattle and 504 MSM in NYC reported sex with another man in the past six months. Sixtyone percent of the Seattle MSM and 35% of the NYC MSM had heard about the "new treatments" ( $p < 0.01$ ). Among these MSM, there were no statistically significant differences between Seattle and NYC in agreement with the following statements: "The new treatments are a cure for AIDS " (10%); "With the news about the new treatments, I am less concerned about becoming infected with HIV or the seriousness of HIV infection " (9%); "Persons with undetectable virus or low viral load are probably not infectious" (6%); "If my partner is taking the new treatment, it is okay for me to have unprotected sex with him" (1%); "If my partner has undetectable virus or low viral load, it is okay for me to have unprotected sex with him" (1%). However, 3% in Seattle vs. 7% in NYC ( $p = 0.04$ ) agreed that. "Persons taking the new treatments are probably not infectious. "

**CONCLUSION:** In both cities a small percentage of young MSM held beliefs that may be associated with reduced perceived risk and subsequent disregard of safe sex practices. As data on treatment efficacy and transmission dynamics become available, public health education targeted to persons demonstrating continued risk will play an increasingly important role in guiding decision-making about behavior.

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